



TECHNICAL BRIEF

Increasing the Utilization of Postpartum Care in Dobez Primary Health Care Center, Kirkuk, Iraq

Background

The USAID Primary Health Care Project in Iraq (PHCPI) is collaborating with the Iraqi Ministry of Health (MOH) to improve the quality of primary health care in the country, with a special emphasis on maternal, newborn, and child health services in order to accelerate Iraq's efforts to achieve its Millennium Development Goals (MDGs) of reducing child and maternal mortality. The project is currently supporting the MOH in transforming its approach to supervision of primary health care services from the traditional approach, where supervisors focus on mistake finding and report writing, to a supportive supervision approach, where supervisors are agents for quality improvement. To date, the project has trained over 90 supervisors across the country in supportive supervision. Following training, the supervisors formed quality improvement (QI) teams in their respective health facilities and provided on-the-job training and coaching to their teams. Training included identification of barriers to providing quality care, analyzing the causes of such barriers, and testing interventions or changes to overcome them. The following brief presents the results of QI activities at the Dobez Primary Health Care Center (PHCC) in Kirkuk Province of northern Iraq.

Methodology

The Dobez PHCC serves a population of 31,000 with an estimated 1,100 annual deliveries. The weak utilization of postpartum care was selected as an important barrier by the clinic QI team, composed



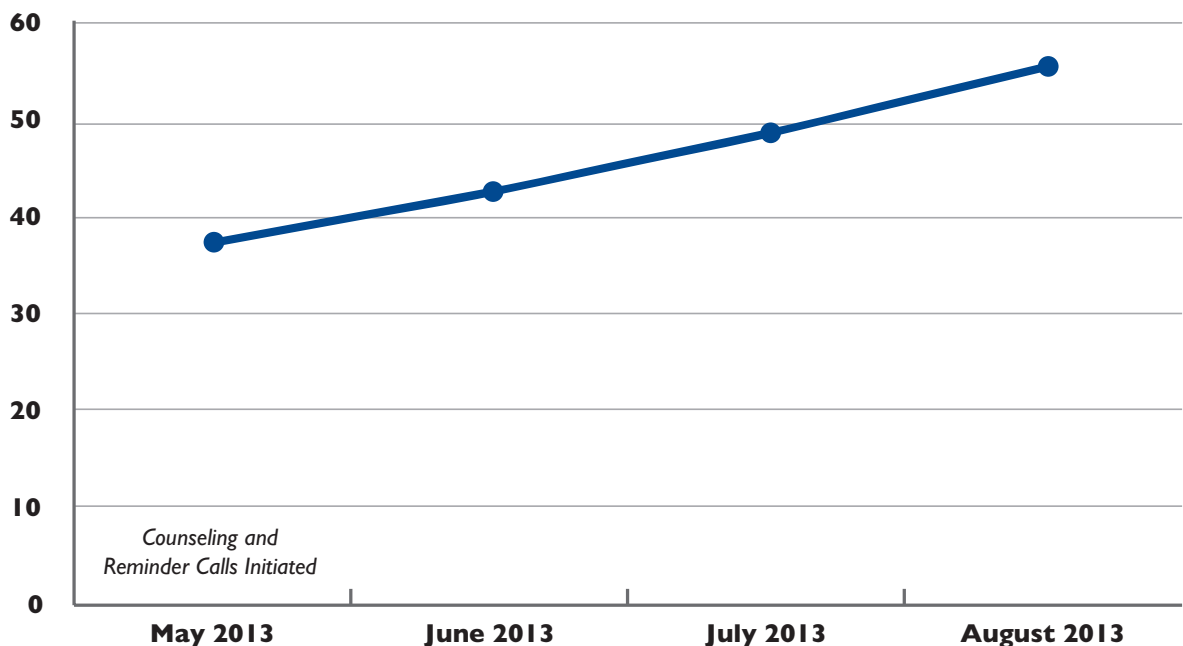
A woman and her infant at the Dobez PHCC in Kirkuk.

of the physician-in-charge and selected clinical and administrative staff. The team applied the “root cause analysis” approach to identify the main causes of the barrier. Then, the team applied the “brainstorming” technique to suggest a list of possible interventions to overcome the barriers and to select the intervention that was most likely to achieve the best results and most feasible for the clinic to apply. The team decided to follow-up each counseling session for postpartum

November 2013

The USAID Primary Health Care Project in Iraq (PHCPI) is funded by United States Agency for International Development (USAID) under Contract No. AID-267-C-0-11-00004.

Figure I. Percentage of 2nd Postpartum Visit DobeZ Health Center, Kirkuk Province, Iraq



	May 2013	June 2013	July 2013	August 2013
Number of clients returning for second postpartum visit	9	30	39	24
Number of clients coming for first postpartum visit	24	70	80	43
Percentage	37.5%	42.8%	48.7%	55.8%

women at the center with telephone calls to the women, reminding them of the date and importance of their follow-up visit. The team collected data from a sample of postpartum visits over time to monitor the impact of the applied intervention on the utilization of follow-up visits. The team used the “run chart” to display the results.

Results

At the beginning of the intervention, the level of utilization of the second postpartum visit (4 – 6 weeks after delivery) was 37.5%. Four months after the application of the intervention of combined counseling and reminder calls, the proportion of women returned for the second postpartum visit reached 55.8%.

Lessons Learned

The documented improvement in the utilization of postpartum visits at DobeZ PHCC demonstrates that health staff at the PHC level are capable of learning and applying QI approaches on their own and measure the impact. While the QI approaches were applied in a specific area of health care; improving the utilization of postpartum care, the approach can be applied to address any other health performance gap. Once a QI team masters the concept and approaches of QI, it is empowered to apply such them to improve services in other health care areas. In addition, the involvement of district level supervisors as “coaches” to the QI team ensures the continuity of the support at the primary health care level and hence the sustainability of the effort.